



Kootenay Boundary (KB) Patient Advisory Committee & Community

TERMS OF REFERENCE - APPROVED JAN 2023

Background

The Patient Advisory Committee & Community (PACC) is a working group of the KB Collaborative Services Committee (CSC), a multidisciplinary group with representatives from the KB Division of Family Practice, Interior Health, First Nations and patients, with a mandate to transform the regional and local health care system into an integrated system of care. The PACC provides input on issues including healthcare delivery, team-based care, patient engagement, best practice models, patient education (health literacy), and use of healthcare resources. One of the two PACC CoChairs represents the PACC as a Patient Partner on the CSC and facilitates bi-directional discussion and information sharing.

Purposes

The KB Patient Advisory Committee & Community (PACC) was established as a forum for patients to advise the CSC on primary care quality improvement and system change at local and regional levels. The PACC is also accessible on request to other health care projects in the region (and provincially, as appropriate) whose leaders seek patient input to inform their work. The PACC is an advocate for patient engagement from within the system; it aims to be an effective agent of real and constructive change.

The PACC is convened with awareness of the IAP2 Spectrum of Public Engagement (<u>click here</u>) in the "Involve" realm. The commitment of the CSC in this context is: "We will work with you to ensure your concerns and aspirations are directly reflected in the alternatives developed and provide feedback on how [your] input influenced the decision".

The PACC's purposes as stated in its Strategic Plan are:

- to increase PACC's capacity as a hub and leader in patient engagement
- to increase diversity of patient voices and address systemic racism & inequality
- to strengthen patient influence on system change
- to educate & empower 'citizen patients'
- to strengthen patient citizenry and engagement at the community level

Responsibilities

- To advise the work of the KB CSC and other health system partners in meeting the needs of patients and families on issues that are brought to the PACC.
- Through a planned approach and an approved <u>Strategic Plan</u>, to develop strategies and carry out actions to strengthen patient engagement and patient & family-centred health care.

Meetings and Conduct of Business

The PACC conducts its business primarily via monthly meetings in approximately 10 months of the year (except July, December), or as determined by the members. Some patient engagement opportunities may take place via email.

The PACC is committed to open and respectful conduct, particularly in sharing different perspectives. PACC members respect each other and each other's perspectives; the PACC communicates respectfully with health system leaders and providers as valued and trusted partners.

Health Care Partners and other guests may be invited to PACC meetings to present patient engagement opportunities and seek PACC input on health care projects; provide health system context from a clinical or operations standpoint; or provide broader patient representation. For groups outside the CSC requesting PACC input, one or more representatives of that group will be asked to attend the PACC meeting to facilitate discussion. Health Care Partners who seek PACC input must complete a PACC Patient Engagement Request Form.

PACC meeting invitations, agendas, and reading materials are circulated via email 1 week prior to the meeting date. Meeting dates/times are determined from time to time by the membership; currently, meetings take place the 4th Friday of the month from 1:00 to 3:00 pm.

Minutes of meetings will be circulated with the agenda package of the following meeting 1 week prior to the that next meeting. Minutes will be sent by email to all members of the PACC, the CSC CoChairs, and others upon request.

The PACC has a website, <u>KBPACC.ca</u>, which communicates the PACC's mandate, membership, linkages, strategic plan, and news items.

Accountability and reporting relationships

One of the two PACC CoChairs communicates directly with the CSC CoChairs, brings questions generated by CSC members to the PACC, and reports PACC responses back to the CSC. The PACC CoChair also participates in discussions at CSC meetings. The PACC includes 1-3 CSC members and 1 staff support who sits on the CSC to help facilitate PACC work and bidirectional communication. The PACC CoChairs may communicate with the KB Division Administrative Assistant to request time on the monthly CSC agenda for discussion or to present informational items.

All PACC communications intended for a public audience must be approved by the CSC CoChairs and/or their delegates (e.g. IH Communications, KB DIvs Communications).

Membership

Members of the PACC Committee will include 8-15 patient representatives.

The membership will elect two CoChairs on an annual basis. CoChairs may serve more than one term.

Recruitment

Members will be recruited through the Patient Voices Network process supported by PACC's recruitment efforts. All candidates will have a screening interview and be selected by the membership based on qualifications and diversity. Recruitment processes will endeavor to achieve a broad representation demographically including geographic representation; Aboriginal representation; other cultural, racial and ethnic groups; self-identified gender; age; and socioeconomic status.

Expectations

The first three months is a trial period, to have time for the PACC and/or the member to find out if they are a good fit. To participate in good standing, all members are expected to:

- Read, understand, accept, and uphold the PACC Ground Rules
- Participate in at least 7 of the anticipated 10+ meetings per year
- Inform the KB Divisions staff support person if they will miss a meeting
- Prepare for meetings (e.g., read documents distributed beforehand, complete any assigned action items)
- Respond to requests for input in a timely manner (e.g. by the proposed deadline)
- Participate actively and constructively to help build the "team" and make involvement a rewarding experience

Term Membership is for a 2-year term. Members may serve for additional terms, as mutually desired.

Qualifications

- Resident of the Kootenay Boundary region
- Have access to email
- Able to attend meeting via Zoom or in person (from time to time) at a central location (e.g. Castlegar)
- Respects diversity and differing opinions
- Respects privacy and confidentiality
- Provides constructive advice

Reimbursement and compensation Mileage and out-of-pocket expenses will be reimbursed.

Resignation Any PACC member who resigns before the expiration of their term will be offered an exit interview.

Support

The PACC is supported by:

- 1 representative from Interior Health, typically the KB Transformation Lead
- 2-4 representatives from the KB Division of Family Practice, including the PACC Support Person, PACC Administrative Assistant, and support from Communications and Quality Improvement/Evaluation

ToR Review

The Committee and the CSC will review these Terms of Reference every 2 years and approve any revisions.